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Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).  FEE TRANSMITTAL  For FY 2009				Complete if Known					
						10/727,546-Conf. #7320			
				— ·		December 5, 2003			
						Hisayoshi TSUBAKI			
				Examiner Name (		C. K. Peterson			
Applicant claims small entity status. See 37 CFR 1.27				Art Unit 2622					
TOTAL AMOUNT OF PAYMENT (\$) 1,740.00				Attorney Docket	No.	2091-0302P			
METHOD OF PAYMENT (check all that apply)									
Check Credit Card Money Order None Other (please identify):									
X Deposit Account Deposit Account Number: 02-2448 Deposit Account Name: Birch, Stewart, Kolasch & Birch, LLP									
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)									
x Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee									
Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17									
FEE CALCULATION	7 CFK 1.10	and 1.17							
1. BASIC FILING, SEARCH	. AND EXA	MINATION FEE	S						
	-	IG FEES		ARCH FEES	EXAMIN	NATION FEES			
Annlination Tuna	F== (\$)	Small Entity	F /¢	Small Entity	F== (6)	Small Entity			
Application Type	Fee (\$)	Fee (\$)	Fee (\$		Fee (\$)	Fee (\$)	rees	Paid (\$)	
Utility	330	165	540	270	220	110			
Design	220	110	100	50	140	70			
Plant	220	110	330	165	170	85			
Reissue	330	165	540	270	650	325			
Provisional	220	110	0	0	0	0			
2. EXCESS CLAIM FEES								Small Entity	
Fee Description	na Daisanna						Fee (\$)	Fee (\$)	
Each claim over 20 (including Reissues) Each independent claim over 3 (including Reissues)							52	26	
Multiple dependent claims							220 390	110	
_				D-i-! (A)				195	
Total Claims 19 Extra Claims Fee (\$)					Multiple Dependent Claims				
HP = highest number of total clai	ms paid for, if g	greater than 20.			re	<u>ee (\$)                                  </u>	ee Paid (	<u>51</u>	
Indep. Claims			F	Fee Paid (\$)		<del></del>		_	
6 -4 or HP =				440.00					
HP = highest number of independ	dent claims paid	d for, if greater thar	1 <b>3</b> .						
3. APPLICATION SIZE FEE									
If the specification and dra	wings excee	ed 100 sheets o	f paper	(excluding electro	onically fil	led sequence or o	computer		
listings under 37 CFR I sheets or fraction thereo					or small ei	ntity) for each ad	ditional 5	,0	
				dditional 50 or frac	41 a.m. 4b. a.m. a	. Eac (\$)	Eas	Doid (\$)	
<u>Total Sheets</u> <u>Ex</u>	tra Sheets	/50 =	eacii a	(round up to a who			. <u>гее</u>	Paid (\$)	
4. OTHER FEE(S)		750 -		(round up to a wile	ie number)	^		Paid (\$)	
4. OTHER FEE(S)  Non-English Specification, \$130 fee (no small entity discount)									
Other (e.g., late filing surcharge): 1801 Request for continued examination (RCE) (see 37 810.00									
o mor (o.g., rate ming ba				sponse within se			49	90.00	
SUBMITTED BY									
Signature	ature 11 Bell 48.912			Registration No. (Attorney/Agent)	29,680	Telephone	(703) 205-8000		
Name (Print/Type) Michael K	. Mutter 🗾	/				Date	May 18, 2009		